UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Expires: April 30,

THOMSON

HANCIA

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Ascentia Biomedical Corporation common and preferred stock Filing under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [X] New Filing [] Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Ascentia Biomedical Corporation Address of Executive Offices (Number and Street, City, State, Zip Code Telephone Number (Including Area Code) 420 Lexington Avenue, Suite 450, New York, New York 10170 (212) 581-5150 Telephone Number (Including Area Code) Address of Principal Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business: PROCESSED [X] corporation [] limited partnership, already formed 1 other limited liability company () business trust [] limited partnership, to be formed Month <u>Year</u> JAN 0 🕏 2007 Actual or Estimated Date of Incorporation or Organization: [X] Actual [] Estimated 10 2001

GENERAL INSTRUCTIONS

Jurisdiction of Incorporation or Organization:

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

(Enter two-letter U.S. Postal Service abbreviation for State: NV

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [X] General and/or Managing Parts
Full Name (Last name first, if individual) Clug, Alex
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Luncan Capital Partners, LLC 420 Lexington Avenue, St. 450, New York, NY 10170
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partners.
Pull Name (Last name first, if individual) Yoon, Peter
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Duncan Capital Partners, LLC 420 Lexington Avenue, St. 450, New York, NY 10170
Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Full Name (Last name first, if individual) Berman, Richard
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Funcan Capital Partners, LLC 420 Lexington Avenue, St. 450, New York, NY 10170
Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Full Name (Last name first, if individual) Ross, Steven
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Duncan Capital Partners, LLC 420 Lexington Avenue, St. 450, New York, NY 10170
Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?.[] Yes [X] Non-accredited investors in this offering?[] Yes [X] Non-accredited investors in this offering?[] Yes [X] Non-accredited investors in this offering?[] Yes [X] Non-accredited investors in this offering?[] Yes [X] Non-accredited investors in this offering.[] Yes [X] Non-accredited investors in this offering.[] Yes [X] Non-accredited investors in this offering.[] Yes [X] Non-accredited investors in this offering.[] Yes [X] Non-accredited investors in this offering.[] Yes [X] Non-accredited investors
2. What is the minimum investment that will be accepted from any individual?
3.Does the offering permit joint ownership of a single unit?
4.Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Name of Associated Broker or Dealer
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
(Check "All States" or check individual States)
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Name of Associated Broker or Dealer
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
(Check "All States" or check individual States)
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Name of Associated Broker or Dealer
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
(Check "All States" or check individual States)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Ent if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate			
	columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Pr		nt Already ld
	Debt	s	Ś	
	Equity	See below*	See	below*
	[X] Common [X] Preferred			
	Convertible Securities	\$	·\$	·
	Partnership Interests	\$	\$	
	Other (Specify) -	\$	\$	
	Total*	See below*	See	below*
	Answer also in Appendix, Column 3 if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering	and the		
	aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons v	vho have		
	purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if a	inswer is		
	"none" or "zero."			
		Numk Inve	er stors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	·•		\$
	Non-Accredited Investors			\$
	Total (for filings under Rule 504 only			\$
3.	If this filing is for an offering under rule 504 or 505, enter the information requested for all securities sold issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities offering. Classify securities by type listed in Part C-Question 1.			
	Type of Offering	Type Secu	of rity	Dollar Amount Sold
	Rule 505	···		_ \$
	Regulation A	···		_ \$
	Rule 504	· · ·		_ \$
	Total			_ \$
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and continue the box to the left of the estimate.	given		
2.	Transfer Agent's Fees	. [1	\$	
	Printing and Engraving Costs			
	Legal Fees			
	Accounting Fees			
	Engineering Fees.	[]	\$	
	Sales Commission and financial advisory fees of broker-dealers, if used (specify Finders Fees separately)	[]	\$	
	Other Expenses (identify) Non-accountable Expenses, Blue Sky Filing Fees	[]	\$	
	Total	[X]	\$ 25,000	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

^{*}Pursuant to the terms and conditions of a Share Exchange Agreement dated as of November 3, 2006 by and among, the Issuer, Fortress Technology Systems, Inc. and the Shareholders of Fortress Technology Systems, Inc. the Issuer issued 254,531,004 shares of its common stock and 8,000,000 shares of its preferred stock to the shareholders of Fortress Technology Systems, Inc., in exchange for 10,231,720 shares of Fortress Technology Systems, Inc. common stock and 8,000,000 shares of Fortress Technology Systems, Inc. preferred stock.

	C. OFFERTING PRICE, NORMEN OF	THESTORE, BREBROSS	AND COM OF TROCEROR	
	b. Enter the difference between the aggreeresponse to Part C - Question 1 and total exto Part C - Question 4.a. This difference is	penses furnished in s the "adjusted gros	response	\$ N/A*
	proceeds to the issuer."	۰,۰۰۰،۰۰۰،۰۰۰،۰۰۰،۰۰۰	*******	\$
5. :	Indicate below the amount of the adjusted gused or proposed to be used for each of tamount for any purpose is not known, furnis box to the left of the estimate. The total equal the adjusted gross proceeds to the iss Part C - Question 4.b above.	the purposes shown. The purposes shown of the payments list	If the check the sted must	
			h	Payments to Officers Directors & Payments to Affiliates Others
	Salaries and fees	•••••	[]	S[]\$
	Purchase of real estate		[]	s
	Purchase, rental or leasing and installation of machinery and o	equipment	[]	\$[]\$
	Construction or leasing of plant buildings and facilities			s[]s
	Acquisition of other businesses	*		s[]\$
	Repayment of indebtedness.			\$[]\$
	Working Capital	•••••	[]	\$ [] \$
	Other (Specify)		•	\$[]\$
	Column Totals		[]	\$[]\$
	Total Payments Listed (column totals added)			[] \$N/A*
	D. FEDERA	I. STONATURE		ŧ
an under	has duly caused this notice to be signed by the undersigned duaking by the issuer to furnish to the U.S. Securities and Exchan dited investor pursuant to paragraph (b)(2) of Rule 502.			
Issu	er (Print or Type)	Signature		Date
Asc	entia Biomedical Corporation	USA		December $\frac{18}{8}$, 2006
Ale	x Clug	Title of S ign President	ner (Print or	Type)
Issuer, 254,531 Pechnol	nt to the terms and conditions of a Share Fortress Technology Systems, Inc. and the ,004 shares of its common stock and 8,000, ogy Systems, Inc., in exchange for 10,231, 00 shares of Fortress Technology Systems, Inc	Shareholders of For 000 shares of its ,720 shares of For	tress Technology S preferred stock to	ystems, Inc. the Issuer issued the shareholders of Fortress
				·
		ATTENTION		
Intent	ional misstatements or omissions of fa	act constitute for	deral criminal vi	olations. (See 18 U.S.C.
1001.)		to competence te	derar orthurnar Al	

E. STATE SIGNATURE_

- 1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) Yes No presently subject to any of the disqualification pro- [] [X] visions of such rule?
- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. N/A
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. N/A
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Ascentia Biomedical Corporation	Signature	Date December 1, 2006
Name (Print or Type)	Title (Print gr Type)	
Alex Clug	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

				APPENDI.					T		
1;	2	2	3			4				5	
∭									Disqualif	ication	
 1			Type of Security	,			under State ULOE				
N 5 1	Intend to a	all									
'	Intend to s		and aggregate	Type of Investor and			(if yes, attach				
1	to non-acc		Offering price	2.4	ימ לתווטון יא לתווטון	rchased :	in State		explanation of		
	Investors i		Offered in state	~	iounc pt (Par	rchased :	2)		waiver granted)		
ll.	(Part B-Ite	m 1)	(Part C-Item 1)		,	1			(Part E-Item 1)		
1		<u> </u>		No. of			No. of Non-	i			
	1		G G3	Accredited	Amount (Ostal ad	Accredited	[
 		1,,,	Common Stock and			(140. 01		١	VEC	1 110	
State	YES	NO	Preferred Stock	Investors	Shares)		Investors	Amount	YES	NO	
AL							1		1		
AK			•								
~~~			ļ								
				<u> </u>			ļ				
ΑZ			i e							l i	
			1								
AR											
***		,			1	r	İ	1			
<del></del>		<del> </del>	<del></del>	<del></del>	<del> </del>					<b></b>	
ĊA							1	1		1	
							_			ŀ	
СО			Ī ·								
``	1	I	I				1	Ī	1	]	
-		<b>├</b> ──		<del></del>	<del>                                     </del>		· · · · · · · · · · · · · · · · · · ·		<del> </del>	-	
CT					i	•					
ļ		<u> </u>					<u> </u>	Ļ	ļ <u> </u>		
DE	1	]				•				i l	
li .	l		•						ļ		
DC -		+		<del> </del>	<del> </del>				· · · · ·	<b>-</b>	
DC	1	i			l						
		ı		<u> </u>	L						
FL					]						
11		ľ			]				ŀ	1	
GA	-	<del>                                     </del>						_		<del>                                     </del>	
GA		1			]					1	
ļ											
HI		1									
ID											
∥∸∸										1	
<b>⊩</b>											
IL	:									1	
Ĺ											
IN							T		Ī		
T 2		<del> </del>		<del></del>	<del>                                     </del>	1	-				
IA			ĺ				I		l		
<u> </u>		ļ <u>.</u>			<u> </u>		ļ				
KS			1				I		1		
l			l	Ì	l		1		ļ		
KY		<u> </u>		i					<del></del>		
***		I			l		1		1		
<del> </del>		<del>                                     </del>		Ļ <u>-</u>	ļ		ļ	<del> </del>		<b> </b>	
LA		I		1	l		I		1		
			<u></u>		<u></u>			L		L	
ME											
					1			1	1		
MD		<u> </u>			<del> </del>	<del> </del>	<del>                                     </del>	<del></del>	<del>l</del>	<del>-</del>	
السيا								l			
<u> </u>	<u></u>	ļ.,		<u> </u>	ļ			<b></b>	<u> </u>		
MA								1			
.		1			1						
MI		1			<b></b>	<del></del>		<u> </u>	ì		
1,7,4								I			
<u> </u>	<u> </u>			Į	<u> </u>			<u> </u>	<del> </del>		
MN								I			
L			<u> </u>	l		:	l	<u> </u>	<u> </u>	]	
MS	,	T									
						•					
MO	<u> </u>	1	<del></del>		<del>                                     </del>		<del></del>	<del> </del>	<del></del>		
MO					ľ		l	I	ł		
<u> </u>		L			<u></u>		L	<u> </u>	L		

1	2		3	5	5				
	Intend to sel to non-accre investors in (Part B-Iten	dited state	Type of Security And aggregate Offering price Offered in state (Part C-Item 1)	4 Type of Investor and Amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	YES	NO	Common Stock and Preferred Stock	No. of Accredited Investors	Amount (No. of Shares)	No. of Non- Accredited Investors	Amount	YES	NO
MT		:				:			
NE									
NV									
NH	<u> </u>	1			<u> </u>		<del></del>		1
NJ	<u> </u>	1			<del></del>	<u> </u>			
NM	<del> </del>	Х	12,438,329	1	12,438,329	1	<del> </del>	<del>                                     </del>	
NY	<u> </u>	Х	239,911,430	3	239,911,430		<del>                                     </del>		
NC						<del></del>	+		<u> </u>
ND				<del> </del>			-		1
ОН	<del>                                     </del>	1		1		<del> </del>			
ок						1			
OR				1		1			_
PA		-	· · · · · · · · · · · · · · · · · · ·	<del> </del>					
RI			<del>,                                    </del>				<del> </del>		-
sc	<del>                                     </del>			;		<del></del>			
SD				1		<del> </del>		<del>                                     </del>	<del> </del>
TN	<u> </u>			<u> </u>					<del>                                     </del>
TX	<u> </u>			<u> </u>					
UT								-	
VT	<del> </del> -							1	
VA						1			† ·
WA	<u> </u>	Х	10,181,245	1	10,181,245				
WV						<del> </del>			1
WI				1					1
WY									
PR	<b>†</b>			1	<u> </u>	1	<del>                                     </del>		